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On Marasmus

by

Edward Willcox

Virginia

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Edward Miller

March 18th 1881

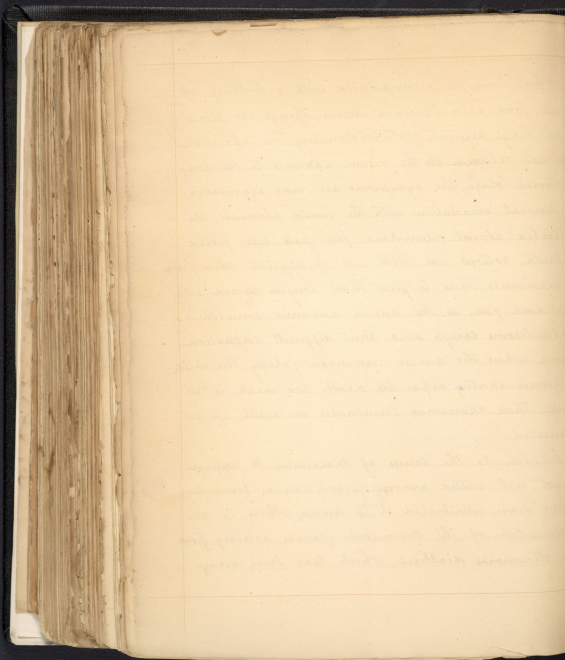
Marasmus. Comprehended under the general title of Marasmus a variety of symptoms have been laid down by authors.

Cullen defines Marasmus a wasting of the flesh with loss of strength, not attended with hectic fever. The objections that might be offered against this definition would be mere negatory, and if a better could be offered I am not aware that it would lead to any practical utility. I shall therefore proceed to give the symptoms of Marasmus occurring in early life. It would not be amiss here I presume to state that Marasmus is very properly divided into two stages, the Incipient and Confirmed.

Symptoms. It usually commences with a depravation of the organs subservient to the Digestive, Assimilating, and Nutritive functions, Hence follow Lappitude and debility, the abdomen swells, frequently pain about Umbilicus, and not unfrequently pain in the head is felt; though it is often attended with costiveness and a voracious appetite. It at

Other times is accompanied with a loathing of all food and Diarrhoea ensues. Though the stools are very frequent, notwithstanding the abdomen is not relieved. As the disease advances to the confirmed stage, the symptoms are more aggravated. General emaciation with the tumid abdomen, the bloated almost adematous face, pale lips, foetid breath, sallow hue, with loss of appetite. When fever supervenes there is great thirst, tongue covered with a dark fur, as the disease advances sometimes a troublesome cough and short difficult respiration, and when the disease terminates fatally the child becomes shortly before its death too weak to sit up. Thus, Marasmus terminates in death if not arrested.

Relative to the Causes of Marasmus; It appears not yet settled among practitioners. Some authors have attributed it to worms, others to an obstruction of the mesenteric glands, arising from a stumorous diathesis, which has been very



satisfactorily demonstrated by defections. These are not the only causes of Marasmus. It most frequently originates from a torpid or vitiated state of the alimentary canal. The passage of the feces is obstructed, which induces the dreadful odour of the mouth and breath, and likewise causes the depraved state of the stomach, which becomes disqualified for discharging its duty, and thereby presents a sufficient supply of nourishment. Thus languor from inanition ensues, attended with all the disorders incident to the case. I am sorry that it has never been in my power to witness the morbid appearance of Marasmus on defection. Every case which I have seen terminated favourably. My friend Mr Gwathmey has favoured me with a case which he had an opportunity of examining. The Conglobate glands of the Mesentery were in this case much enlarged and inflamed, the hardened lymphatic vessels connecting them were very distinctly felt between the fingers, in the

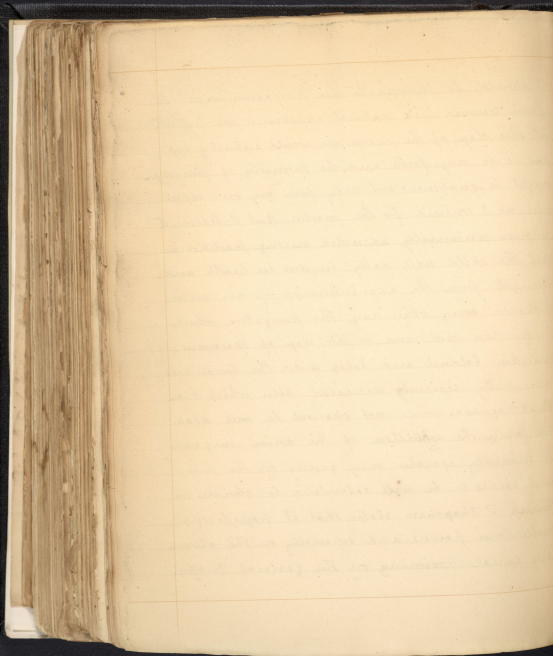
intestines nothing very remarkable was to be observed, they were pale, and contained a small quantity of feculent matter in the lower portion. The liver was a little increased in size, of a pale yellow colour. The spleen was considerably enlarged. Not the slightest portion of adipose matter could be discovered in the whole cavity of the abdomen. The Lymphatic glands in the Thorax were enlarged and hardened, the chain continuing up the neck. The lungs much inflamed and adhering to the parietes of the Thorax in various places. This case arose no doubt from a stumous diathesis of the system. Though I am thoroughly convinced that Marasmus most frequently arises from a vitiated state of the alimentary canal. The slightest attention to the history of Marasmus I think is sufficient to evince that costiveness precedes and accompanies the other symptoms. This disease is confined more especially to children and makes its attack about the time they are weaned. Those that are of a weak and infirm habit are

most apt to be attacked with this disease, Children also are more subject to Marasmus when confined in close apartments hence we most frequently meet with it, in the ~~pro~~lap of people. Marasmus has been considered among the most difficult disease to manage, which children are subject to, This is very easily accounted for, the older physicians considering, the disease depending upon debility were inclined to place their whole dependence on the use of Tonics, they were likewise under the impression that children owing to the extreme delicacy and frailty of their constitution, could not bear the operation of active remedies such hypothetical doctrines have long since perished. It has been previously stated that Marasmus would readily admit of a division the Suspicious and Confirmed. In the first stage the bowels are not so completely blocked up if I may be allowed the expression. It is obviously if called to a patient in this stage, the leading indication ~~to~~ to remove the accumulated mass of feculent matter in the intestines

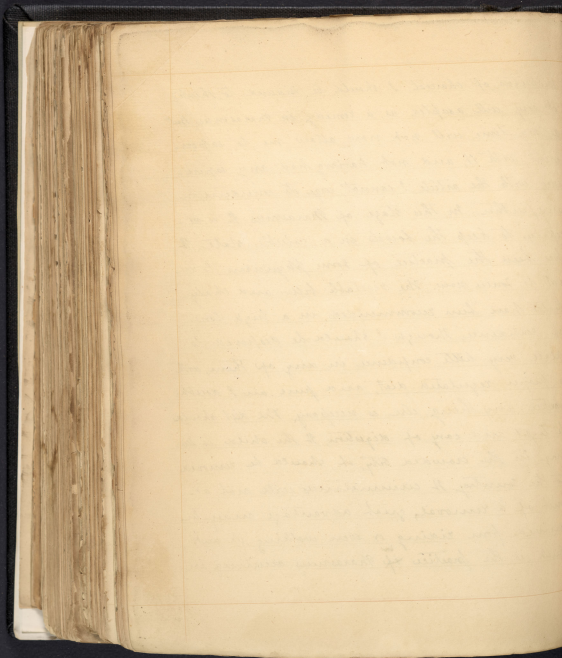
for this purpose I know nothing superior to Calomel either alone or in combination with Jalap. After having evacuated the bowels it then becomes necessary to keep them in a soluble state, which may be done by any of the mild laxatives, when convalescence has commenced a mild and nutritious diet constitutes the most effectual tonic that can be administered. I have found this stage of Marasmus to yield under the treatment which I have detailed, and I believe this disease as easy to cure as any which affects children. But should Marasmus be neglected in the incipient stage or improperly treated it soon runs into the confirmed stage, which is more embarrassing to the physician. It is now necessary to call to mind the torpid state of the intestines, and that we have to remove indurated and fetid feces which have been accumulated probably for months. To awaken the sensibility of the intestines, and discharge them of these noxious contents. It becomes necessary to

Commence a regular system of purging. But sup-
pose the disease does not arise from the cause
which I have ascribed it to, Let Worms be the
origin as some have supposed the practice
which I recommend is not improper, purga-
tives are among the best Anthelmintics we pos-
sess, or should the disease arise from a morbid
condition of the Mesenteric glands the same
class of remedies is decidedly the best deobstru-
ents and may be employed with unequivocal
advantage. Whatever be the pathology that is
entertained of Marasmus I am not aware
that any injury would result in the treat-
ment. I have observed that the leading indi-
cation here was purging, which should be
persevered in for some time. In order to de-
rive information of the effects of purgatives it
has been recommended to inspect what is passed
at stool. The smell and the appearance of the feces are
a criterion of the progress we make in the cure.

I should be induced to use purgatives until the feces resumed their natural appearance the patient at this stage of the disease, we would naturally suppose to be very feeble and the propriety of purging might be questioned; not only from my own experience do I contend for the practice, But I believe it is now universally admitted among practitioners that the child will daily improve in health and strength from the administration of an active cathartic every other day. The purgative which I have seen most used in this stage of Marasmus - has been Calomel and Jalap until the bowels have been pretty copiously evacuated. After which Rhen barb. & Magnesia. would not charcoal be well adapted after the exhibition of the active purgatives It certainly operates very gently on the bowels and seems to be well calculated to obviate costiveness Dr Chapman states that it possesses considerable tonic powers, and especially on the alimentary canal. Reasoning on the general propo-



properties of charcoal, I should be inclined to think it very well adapted as a remedy in Marasmus. But as my time will not now allow me to experiment with it, and not having had any experience with the article I cannot urge its consideration any further. In this stage of Marasmus, it is necessary to keep the bowels in a soluble state. It has been the practice of some Physicians to resort to Ionic now. The vegetable bitter and chalybeates have been recommended in a high tone of confidence, though I should be disposed to place very little confidence in any of them, with a proper regulated diet, and pure air I doubt whether anything else is necessary. The diet should be light and easy of digestion, & the child is living in the crowded city, it should be removed to the country. If circumstances will not admit of a removal, great advantage may be derived from riding or even walking it out. Such is the practice ⁱⁿ of Marasmus occurring in



Children, and I have great assurance of the
success attending it. In the almshouse of Phil-
adelphia there has occurred about twenty cases
in the course of the last 18 Months and only
one or two terminated fatally.

To the professors of the University, under whom -
as pupils I have been educated, in taking my
leave, I return ~~them~~ my sincere thanks for the
many advantages which I trust I have derived
and may they enjoy long life and happiness.

Henry Holcomb

admitted March 24th 1856

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Very Respectfully

Wm. L. G. ...